

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		48	4/6/01
FORMALITY REVIEW	H.L	1070	04/23/01
RESPONSE F RMALITY REVIEW	01	825	2-24/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓		
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10	✓		
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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